FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	339001	
<015>	Study Area Name	CTC TELCOM, INC.	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Brooke Grimshaw	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	bgrimshaw@tcatel.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

									July	2013		
<010>	Study Area Co	Study Area Code										
<015>	Study Area N	ame				CTC TELCOM,	INC.					
<020>	Program Year					2018						
<030>	Contact Name	e - Person USAC	should contac	t regarding this	s data	Brooke Grim	nshaw					
<035>	Contact Telep	hone Number	· Number of pe	rson identified	in data line <0	30> ⁷¹⁹²⁶⁶⁴³³⁴	ext.					
<039>	Contact Emai	l Address - Ema	il Address of pe	erson identified	l in data line <0	30> bgrimshaw@t	catel.com					
<210>	For the prio	r calendar yea	ır, were there	any reportal	ble voice serv	ice outages?	No					
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Did This Outage		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of Customers	Affected (Yes / No)	Description (Check all that apply)	Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures

	fulfilled Service Request		FCC Form 481	
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control July 2013	No. 3060-0819
<010>	Study Area Code	339001		
<015>	Study Area Name	CTC TELCOM, INC.		
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw		
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com		
<300> L	Infulfilled service request (voice)	NA		
<310>[Detail on attempts (voice)			
	Nam	e of Attached Document		
<320>	Unfulfilled service request (broadband)			
	<u> </u>			
<330>	Detail on attempts (broadband)			
	. ,	lame of Attached Document		_

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	339001	
<015>	Study Area Name	CTC TELCOM, INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should conta	act regarding this data Brooke	Grimshaw
<035>	Contact Telephone Number - Number of p <030>		7192664334 ext.
<039>	Contact Email Address - Email Address of <030>	person identified in data line	bgrimshaw@tcatel.com
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or or	e telephony service in the prior ch you are designated an ETCfo	
<410>	Complaints per 1000 customers for fixed v	voice	0.0
<420>	Complaints per 1000 customers for mobile	e voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or gre the prior calendar year for each service are an ETC for any facilities you own, operate,	eater) for broadband service in ea in which you are designated	
<440>	Complaints per 1000 customers for fixed b	proadband	
<450>	Complaints per 1000 customers for mobile	e broadband	

` '	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/ OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	339001	
<015>	Study Area Name	CTC TELCOM, INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com	
<500>	Certify compliance with applicable service quality standards and consumer pro	otection rules Yes	
		339001WI0510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Stuations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	339001
<015>	Study Area Name	CTC TELCOM, INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Stuations	339001WI0610.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	339001	
<015> Study Area Name	CTC TELCOM, INC.	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw	
<035> Contact Telephone Number - Number of person identified in data li	ine <030> 7192664334 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> bgrimshaw@tcatel.com	
<701> Residential Local Service Charge Effective Date 1/1/2017 <702> Single State-wide Residential Local Service Charge 19.95		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	< b3>	<b4></b4>	<b5></b5>	<>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (ŒTC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fee
_									
_									
_									
-									
					_				
_					See at	tached worksheet			
_									
_									
-									
-			-						

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/ OMB Control No. 3060-0819
	աly 2013

<010>	Study Area Code	39001
<015>	Study Area Name	CTC TELCOM, INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<02>	<>>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
								, ,	

	erating Companies ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		339001	
<015>	Study Area Name		CTC TELCOM, INC.	
<020>	Program Year		2018	
<030>	Contact Name - Person l	JSAC should contact regarding this data	Brooke Grimshaw	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	bgrimshaw@tcatel.com	
<810>	Reporting Carrier	CTC Telcom Inc dba Mosaic		
<811>	Holding Company	Name Not Available		
<812>	Operating Company	CTC Telcom Inc dba Mosaic		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
-			
-			
-			
-	See atta	ached workshe	et
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			

	bal Lands Reporting lection Form	FCCForm 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	19
<010>	Study Area Code	339001	
<015>	Study Area Name	CTC TELCOM, INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of Attached Document	
If your o	company serves Tribal lands, please select (Yes, No, NA) for each these boxes		
	rm the status described on the attached PDF, on line 920,		
	strates coordination with the Tribal government pursuant to	Select	
	3(a)(9) includes:	Yes or No or	
<921> <922> <923>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner;	Not Applicable	
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Sting rules		
<927>	Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		
<929>	Compliance with Tribal Business and Licensing requirements.		

	oice and Broadband Service Rate Comparability ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	339001
<015>	Study Area Name	CTC TELCOM, INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com
<1000>	Voice services rate comparability certification Yes	
<1010>	Attach detailed description for voice services rate comparability compliance	Name of Attached Document
<1020> <1030>	Broadband comparability certification Attach detailed description for broadband comparability compliance	Name of Attached Document
		Name of Attached Document

` '	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> <015>	Study Area Code Study Area Name	339001 CTC TELCOM, INC.	
<020> <030>	Program Year Contact Name - Person USAC should contact regarding this data	2018	
<035>	Contact Telephone Number - Number of person identified in data line <030>	Brooke Grimshaw 7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	erms and Condition for Lifeline Customers			FCC Form 481
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form			July 2013
<010>	Study Area Code		339001	
<015>	Study Area Name		CTC TELCOM, INC.	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Brooke Grimshaw	
<035>	Contact Telephone Number - Number of person identified in data lin			
<039>	Contact Email Address - Email Address of person identified in data lin	ne <030>	bgrimshaw@tcatel.com	
		Г	339001WI1210.pdf	
			333001WIIZIO.pai	
-1010-	Towns 0. On all the second Vision Tollands and Life lines Disco			
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
				Name of Attached Document
4000				
<1220>	Link to Public Website	HTTP		
" D	to all the control of the least to the first the control of the co	140		
	neck these boxes below to confirm that the attached document(s), on line 12	210,		
	bsite listed, on line 1220, contains the required information pursuant to			
•	(a)(2) annual reporting for ETCs receiving low-income support, carriers must			
annually i	report:			
<1221>	Information describing the terms and conditions of any voice	—		
\12Z1/	telephony service plans offered to Lifeline subscribers,			
	taraphien, see how promotion out to minimo dubour 19010,			
<1222>	Details on the number of minutes provided as part of the plan,	✓		
<1223>	Additional charges for toll calls, and rates for each such plan.	V		
ŕ	G	ل		

Data Coll	ice Cap Carrier Additional Documentation lection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	339001	
<015>	Study Area Name	CTC TELCOM, INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR§ 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for		
<2023>	projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of		
	capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund, WC Docket 10-90, Report and Order, FCC13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

(2005) Price Cap Carrier Additional Documentation	FCCForm 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Induding Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013
Price Cap Carrier Connect America ICC Support {47 CFR § 54.3	313(d)}
Connect America Phase II Reporting (47 CFR § 54.313(e))	
<2017A> Connect America Fund Phase II recipient?	
<2017C> Total amount of Phase II support, if any, the price cap car capital expenditures in 2016.	rier used for
<2018> Attach the number, names, and addresses of community institutions to which the carrier newly began providing a broadband service in the preceding calendar year - 54.31	ccess to Name of Attached Document Listing
<2019> Recipient certifies that it bid on category one telecommulaternet access services in response to all FCC Form 470 broadband service that meets the connectivity targets for libraries universal service support program for eligible so libraries located within any area in a census block where receiving Phase II model-based support, and that such bor reasonably comparable to rates charged to eligible school urban areas for comparable offerings - 54.313(e)(1)(ii)(C)	postings seeking or the schools and chools and the carrier is ids were at rates ols and libraries in

(ED)5) Rate (Data Collection	Of Return Carrier Additional Documentation 🖫 🖫				FOCForm 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		339001		
<015>	Study Area Name		CTC TEL	COM, INC.	
<020>	Program Year		2018	COM, INC.	
<030>	Contact Name - Person USAC should contact regarding this d	ata	Brooke	Grimshaw	
<035>	Contact Telephone Number - Number of person identified in	data line <030>	71926643		
<039>	Contact Email Address - Email Address of person identified in	n data line <030>	bgrimsh	aw@tcatel	.com
inancial r	m the drop down menu or check the boxes below to eporting requirements set forth in 47 CFR 54.313(f)(below is accurate. Progress Report on 5 Year Plan				
(3009)	Carrier certifies to 54.313(f)(1)(iii)				
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}			Γ	
3010B)	Please Provide Attachment	Name of Attache	ed Document Lis	sting Required	
3012A)	Community Anchor Institutions (47 CFR)	IIIOIIIatioii		-	
3012B)	54.313(f)(1)(ii)} Please Provide Attachment	Name of Attache	ed Document Lis	sting Required	
3013)	Is your company a Privately Held ROR Carrier {47 CFR	Information (Yes/No)	\circ	0	
3014)	§ 54.313(f)(2)} If yes, does your company file the RUSannual report	(Yes/No)	0	0	
,	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		_		
3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		L		
3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		L		
3017)	If the response is yes on line 3014, attach your company's RUSannual report and all required	Name of Attache Information	ed Document Lis	sting Required	
(3018)	documentation If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your binission on line 3006 pursuing to \$ 5.6.312(f)(2), contains:	(Yes/N	lo)	0	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Ether a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS				
3020)	Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:				
3022)	Suzo pursuant to § 54.313(1/z), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUSOperating Report for Telecommunications Borrowers				
3023)	Underlying information subjected to a review by an independent certified public accountant				

Name of Attached Document Listing Required Information

(3024)

(3025)

(3026)

Underlying information subjected to an officer certification.

Document(s) with Balance Sneet, Income Statement and Statement of Cash Flows

Attach the worksheet listing required information

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCCForm 481
Data Collection Form	OMB Control No. 3060-0986/ OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	339001
<015>	Study Area Name	CTC TELCOM, INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com

Financial Data Summary	
·	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

(4005) Rural Broadband Experiment Data Collection Form	Additional Documentation	FCC Form 481 OMB Control No. 3060-0986/ OMB Control No. 3060-0819
		July 2013

<010>	Study Area Code	339001
<015>	Study Area Name	CTC TELCOM, INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw
<035>	Contact Telephone Number - Number of person identified in data lin	ne <030> 7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ne <030> bgrimshaw@tcatel.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses Name of Attached Document Listing Required Information of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Broadband Deployment Locations - FOC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

Name of Attached Document Listing Required Information

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.

Name of Attached Document Listing Required Information

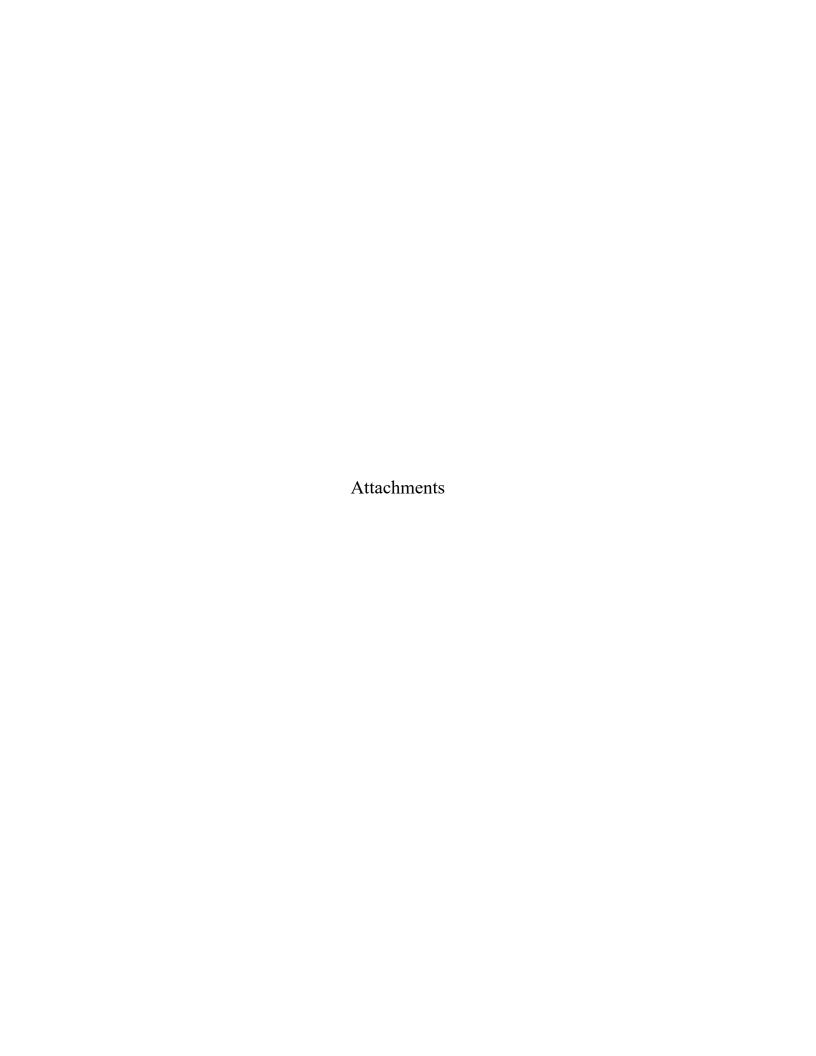
	ion - Agent / Carrier ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	339001	
<015>	Study Area Name	CTC TELCOM, INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

uring the accuracy of the annual data reporting requirements provided to the authorized and agent is accurate.
Date: 06/19/2017
Date for this form: 07/03/2017

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients of	on Behalf of Reporting Carrier	
	into an habalf af the manastice coming the	
l, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recip the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information re	·	e provided
Name of Reporting Carrier: CTC TELCOM, INC.		-
Name of Authorized Agent Firm: TCA, Inc		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 06/19/2017	
Name of Authorized Agent Employee: Brooke Grimshaw		
Title or position of Authorized Agent or Employee of Agent Senior Financial Consultant		
Telephone number of Authorized Agent or Employee of Agent: 7192664334 ext.		
Study Area Code of Reporting Carrier: 339001 Filing Due Date for this form: 07/03/2017	7	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 18 of the United States Code, 18 U.S.C. § 1001.	47 U.S.C. §§ 502, 503(b), or fine or imprisonment	under Title



FCC Form 481 Certifications

FCC Form 481 Lines 510

CTC Telecom, Inc

SAC 339001

Line 510: Service Quality Standards & Consumer Protection Rules Compliance

Service Quality Standards

The Company complies with the service quality standards set forth in the following sections of the rules of the Wisconsin Public Service Commission (WI PSC):

• WI Admin Code Chapter PSC 165 Standards for Telecommunications Service

Consumer Protection Rules

The company complies with the following consumer protection rules:

- FCC rules regarding (1) Verification of orders for telecommunications service as required of submitting carriers {47 CFR §64.1100}, (2) Truth-in-Billing Requirements {47 CFR §64.2400}, and (3) 47 C.F.R. § Part 64 Subpart U, Customer Proprietary Network Information
- Federal Trade Commission 16 C.F.R. §681, Identity Theft Red Flags
- All consumer protection rules found in WI Admin Code Chapter PSC 165

FCC Form 481 Certifications

FCC Form 481 Lines 610

CTC Telecom, Inc

SAC 339001

Line 610: Functionality in Emergency Situations

• The Company has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of god. These provisions include, but are not limited to, installing adequate battery reserve capacity where needed, training personnel in appropriate emergency procedures and maintaining the ability to reroute traffic around damaged facilities. FCC rule 47 CFR §54.202(a), WI Admn. Code PSC 165.065 (Emergency Operations).

(700) Price Offerings including Voice Rate Data			FCC Form 481	
Data Coll	ection Form		OMB Control No. 3060-0986/ OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code	339001		
<015>	Study Area Name	CTC TELCOM, INC.		
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	Brooke Grimshaw		
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	bgrimshaw@tcatel.com		

<701> Residential Local Service Charge Effective Date <702> Single State-wide Residential Local Service Charge 1/1/2017 19.95

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<04>	<bs></bs> 5>	<>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (ŒTC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
WI	All Exchanges		FR	19.95	0.0	0.87	0.0	20.82

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		339001
<015>	Study Area Name		CTC TELCOM, INC.
<020>	Program Year		2018
<030>	Contact Name - Person U	JSAC should contact regarding this data	Brooke Grimshaw
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>		bgrimshaw@tcatel.com
<810>	Reporting Carrier	CTC Telcom Inc dba Mosaic	
<811>	Holding Company	Name Not Available	
<812>	Operating Company	CTC Telcom Inc dba Mosaic	

<813>	≪a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	Chibardun Telephone Cooperative	330861	Mosaic Telecom
_	Chibardun Cable TV Corporation, Inc		Mosaic Telecom
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FCC Form 481 Certifications

FCC Form 481 Line 1210 CTC Telecom, Inc. SAC 339001

Line 1210: Lifeline Terms and Conditions

Lifeline subscribers receive a discount of \$10.00, \$9.25 federal and \$0.75 state, which can be applied to any regular plan rate (see attached).